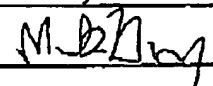


S&amp;H Form: (02/05)

<b>REPLY/AMENDMENT FEE TRANSMITTAL</b>		Attorney Docket No.		1454.1217			
		Application Number		10/084,654			
		Filing Date		February 28, 2002			
		First Named Inventor		Bernhard MAYR			
		Group Art Unit		2686			
AMOUNT ENCLOSED		0.00		Examiner Name		DANIEL JR, WILLIE J	
<b>FEE CALCULATION (fees effective 12/08/04)</b>							
CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations		
TOTAL CLAIMS	9	- 20 =	0	X \$ 50.00 =	\$ 0.00		
INDEPENDENT CLAIMS	2	- 3 =	0	X \$ 200.00 =	0.00		
Since an Official Action set an <u>original</u> due date of <u>November 9, 2005</u> , petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$450)); (3 months (\$1,020)); (4 months (\$1,590)); (5 months (\$2,160)):							
If Notice of Appeal is enclosed, add (\$500.00)							
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$130.00)							
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)							
Total of above Calculations =						\$ 0.00	
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)							
<b>TOTAL FEES DUE =</b>						<b>\$ 0.00</b>	
(1) If entry (1) is less than entry (2), entry (3) is "0". (2) If entry (2) is less than 20, change entry (2) to "20". (4) If entry (4) is less than entry (5), entry (6) is "0". (5) If entry (5) is less than 3, change entry (5) to "3".							
<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b> I hereby certify that this correspondence is being transmitted via facsimile to: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450 On <u>Nov 9, 2005</u> By: <u>STAAS &amp; HALSEY</u> Date: <u>11-9-05</u>							
<b>METHOD OF PAYMENT</b>							
<input type="checkbox"/> Check enclosed as payment. <input type="checkbox"/> Charge "TOTAL FEES DUE" to the Deposit Account No. below. <input checked="" type="checkbox"/> No payment is enclosed.							
<b>GENERAL AUTHORIZATION</b>							
<input checked="" type="checkbox"/> If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: Deposit Account No. <u>19-3935</u> Deposit Account Name <u>STAAS &amp; HALSEY LLP</u>							
<input checked="" type="checkbox"/> The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.							
SUBMITTED BY: STAAS & HALSEY LLP							
Typed Name		Mark J. Henry		Reg. No.		36,162	
Signature				Date		November 9, 2005	

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